Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 1 of 46

United States Bankruptcy Court Northern District of Illinois						Voluntar	y Petition	
Name of Debtor (if individual, enter Last, First, Greathouse, Robert G		Name	of Joint De	ebtor (Spouse)	(Last, First	t, Middle):		
All Other Names used by the Debtor in the last (include married, maiden, and trade names):			used by the J maiden, and		in the last 8 years			
Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all)	ayer I.D. (ITIN)/Con	mplete EIN	Last fo	our digits of than one, state	f Soc. Sec. or	Individual-	Taxpayer I.D. (ITIN)	No./Complete EIN
Street Address of Debtor (No. and Street, City, a 1848 Redwood Ave Hanover Park, IL	and State):	ZIP Code	Street	Address of	Joint Debtor	(No. and St	reet, City, and State):	ZIP Code
County of Residence or of the Principal Place o	f Rusiness:	60133	Count	v of Reside	ence or of the	Principal Pl	ace of Business:	
Cook	i Dusiliess.		Count	y of Reside	since of of the	i illicipai i i	ace of Business.	
Mailing Address of Debtor (if different from str	eet address):		Mailir	g Address	of Joint Debto	or (if differe	ent from street address):
	Г	ZIP Code	4					ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):								
Type of Debtor (Form of Organization) (Check one box)		of Business					ptcy Code Under Whiled (Check one box)	nich
Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) Chapter 15 Debtors Country of debtor's center of main interests:	(Check bo	Real Estate as d 101 (51B) roker empt Entity vx, if applicable)			er 7 er 9 er 11 er 12	C of C of Natur (Checinsumer debts.	hapter 15 Petition for f a Foreign Main Proc hapter 15 Petition for f a Foreign Nonmain I e of Debts k one box)	eeding Recognition
Each country in which a foreign proceeding by, regarding, or against debtor is pending:	Debtor is a tax-e under Title 26 o Code (the Intern	f the United State	es	"incurr	ed by an indivional, family, or l	dual primarily nousehold pur	y for rpose."	iness deous.
Filing Fee (Check one box Full Filing Fee attached □ Filing Fee to be paid in installments (applicable to attach signed application for the court's considerat debtor is unable to pay fee except in installments. Form 3A. □ Filing Fee waiver requested (applicable to chapter attach signed application for the court's considerat	individuals only). Musion certifying that the Rule 1006(b). See Offi	St Check if: Check if: Check all Check all Check all Check all	btor is a si btor is not btor's aggi less than applicable blan is bein	a small busing regate nonco \$2,490,925 (as boxes: ag filed with	debtor as defin ness debtor as d ntingent liquida amount subject this petition.	efined in 11 t ted debts (exo to adjustment	C. § 101(51D). U.S.C. § 101(51D). cluding debts owed to in t on 4/01/16 and every the	ree years thereafter).
amen organic approximon for the courts considerate	.o 500 0110m 1 0111	I LI Ac			vere solicited pros.C. § 1126(b).	epetition fron	n one or more classes of	creditors,
Statistical/Administrative Information ☐ Debtor estimates that funds will be available ☐ Debtor estimates that, after any exempt prop there will be no funds available for distribut	erty is excluded and	d administrative		es paid,		THIS	S SPACE IS FOR COUR	Γ USE ONLY
Estimated Number of Creditors	1,000- 5,001- 5,000 10,000	10,001- 2	25,001- 50,000	50,001- 100,000	OVER 100,000			
\$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1	\$1,000,001 \$10,000,001 to \$10 to \$50 million million	1 \$50,000,001 \$ to \$100 to	3100,000,001 o \$500 nillion	\$500,000,001 to \$1 billion				
	\$1,000,001 \$10,000,001 to \$10 to \$50	1 \$50,000,001 \$	3100,000,001 0 \$500	\$500,000,001 to \$1 billion				

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 2 of 46

B1 (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Greathouse, Robert G (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ David Cutler November 23, 2015 Signature of Attorney for Debtor(s) (Date) **David Cutler** Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(04/13)

Voluntary Petition

(This page must be completed and filed in every case)

Signatures

$Signature (s) \ of \ Debtor (s) \ (Individual/Joint)$

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Robert G Greathouse

Signature of Debtor Robert G Greathouse

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

November 23, 2015

Date

Signature of Attorney*

X /s/ David Cutler

Signature of Attorney for Debtor(s)

David Cutler

Printed Name of Attorney for Debtor(s)

Cutler & Associates, Ltd.

Firm Name

4131 Main St Skokie, IL 60076

Address

Email: stuartlswanson@gmail.com 847-673-8600 Fax: 847-673-8636

Telephone Number

November 23, 2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Greathouse, Robert G

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

X

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 4 of 46

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of Illinois

In re	Robert G Greathouse		Case No.	
		Debtor(s)	Chapter	7

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 5 of 46

B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2				
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); ☐ Active military duty in a military combat zone.					
□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.					
I certify under penalty of perjury th	t the information provided above is true and correct.				
Signature of Debtor: /s/ Robert G Greathouse					
_	Robert G Greathouse				
Date: November	er 23, 2015				

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 6 of 46

B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

In re	Robert G Greathouse		Case No		
-		Debtor	,		
			Chapter	7	
			<u> </u>		

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	165,000.00		
B - Personal Property	Yes	3	5,700.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		135,000.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		6,000.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	6		61,947.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			4,476.33
J - Current Expenditures of Individual Debtor(s)	Yes	2			4,465.00
Total Number of Sheets of ALL Schedu	ıles	20			
	T	otal Assets	170,700.00		
			Total Liabilities	202,947.00	

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 7 of 46

B 6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

In re	Robert G Greathouse		Case No.		
-		Debtor			
			Chapter	7	

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	6,000.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	6,000.00

State the following:

Average Income (from Schedule I, Line 12)	4,476.33
Average Expenses (from Schedule J, Line 22)	4,465.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	7,501.00

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	6,000.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		61,947.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		61,947.00

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 8 of 46

B6A (Official Form 6A) (12/07)

less cost of sale)

In re	Robert G Greathouse	Case No.	
_		Debtor	

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Single Family Residence - 1848 Redwood Ave,		-	165,000.00	135,000.00
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Sub-Total > **165,000.00** (Total of this page)

Total > **165,000.00**

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 9 of 46

B6B (Official Form 6B) (12/07)

In re	Robert G Greathouse	Case No.	
_		Debtor	

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	X			
2.	Checking, savings or other financial accounts, certificates of deposit, or		Checking - Fifth third	-	0.00
	shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking - Barrington Bank and Trust	-	2,000.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, including audio, video, and computer equipment.		Personal possessions in home at liquidation value	-	750.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.		Personal clothing	-	400.00
7.	Furs and jewelry.		Wedding ring	-	50.00
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10.	Annuities. Itemize and name each issuer.	X			
				Sub-Tot	al > 3,200.00

2 continuation sheets attached to the Schedule of Personal Property

(Total of this page)

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 10 of 46

B6B (Official Form 6B) (12/07) - Cont.

In re	Robert G Greathouse	Case No.	

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	х			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	x			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	x			
			(To	Sub-Tota of this page)	al > 0.00

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 11 of 46

B6B (Official Form 6B) (12/07) - Cont.

In re	Robert G Greathouse	Case No.
		•

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	2002	Saturn L100 130,000 miles	-	2,000.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	Com	puter	-	500.00

| Sub-Total > 2,500.00 (Total of this page) | Total > 5,700.00

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 12 of 46

B6C (Official Form 6C) (4/13)

In re	Robert G Greathouse	Case No.	
_		Debtor	

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

11 U.S.C. §522(b)(2)

11 U.S.C. §522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Checking, Savings, or Other Financial Accounts, C Checking - Fifth third	Certificates of Deposit 735 ILCS 5/12-1001(b)	0.00	0.00
Checking - Barrington Bank and Trust	735 ILCS 5/12-1001(b)	2,000.00	2,000.00
Household Goods and Furnishings Personal possessions in home at liquidation value	735 ILCS 5/12-1001(b)	750.00	1,500.00
Wearing Apparel Personal clothing	735 ILCS 5/12-1001(a)	400.00	400.00
Furs and Jewelry Wedding ring	735 ILCS 5/12-1001(b)	50.00	50.00
<u>Automobiles, Trucks, Trailers, and Other Vehicles</u> 2002 Saturn L100 130,000 miles	735 ILCS 5/12-1001(c)	2,000.00	2,000.00
Other Personal Property of Any Kind Not Already Computer	<u>Listed</u> 735 ILCS 5/12-1001(b)	500.00	500.00

Total: 5,700.00 6,450.00

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Page 13 of 46 Document

B6D (Official Form 6D) (12/07)

In re	Robert G Greathouse	Case No.
		,
		Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDAT	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. Zafer Buyukkusoglu Dolapdere sanayi sitesi 1, ada no 9-11-13 Ikitelli Istanbul Turkiye	x	_	Single Family Residence - 1848 Redwood Ave, Hannover Park IL (value per zillow 9/25/15 \$177,000 less cost of sale) Value \$ 165,000.00		A T E D		135,000.00	0.00
Account No.			Value \$					
Account No.			Value \$					
Account No.			Value \$					
continuation sheets attached		·	S (Total of th	ubto			135,000.00	0.00
			(Report on Summary of Sc		ota ule		135,000.00	0.00

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 14 of 46

B6E (Official Form 6E) (4/13)

In re	Robert G Greathouse	Case No
-		, Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 15 of 46

B6E (Official Form 6E) (4/13) - Cont.

In re	Robert G Greathouse		Case No.	
-		,		
		Debtor		

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Domestic Support Obligations

TYPE OF PRIORITY UNLLQULDATED CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** w INCLUDING ZIP CODE, AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) Account No. **Illinois Child Support Enforcement** 0.00 509 S 6th Street Springfield, IL 62701 Х 6,000.00 6,000.00 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 6,000.00 6,000.00 Total 0.00

(Report on Summary of Schedules)

6,000.00

6,000.00

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 16 of 46

B6F (Official Form 6F) (12/07)

In re	Robert G Greathouse	Ca	ase No.
_		Debtor	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	C	Нι	usband, Wife, Joint, or Community	Ç	U	D I	
(See instructions above)	CODEBLOR	J H H	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETORE SO STATE	CONTINGEN	αυ_	SPUTED	AMOUNT OF CLAIM
Account No. xxx9999				T	DATED		
					E D		
ACS Education Services 501 Bleecker St Utica, NY 13501							
							0.00
Account No. xxx2014							
ACS/College 501 Bleecker St Utica, NY 13501-2401							
							21,248.00
Account No. xxx0000							
American Eagle Bank 556 Randall Rd South Elgin, IL 60177							
							0.00
Account No. xxx0772 Best Buy/CBNA PO Box 6497 Sioux Falls, SD 57117-6497							
							1,600.00
			S	ubt	ota	l	20.045.55
_5 continuation sheets attached			(Total of the	nis j	pag	e)	22,848.00

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 17 of 46

B6F (Official Form 6F) (12/07) - Cont.

In re	Robert G Greathouse	Case No.	
_		Debtor	

		_					
CREDITOR'S NAME,	C	ŀ	Husband, Wife, Joint, or Community	CON	U N L	D	
MAILING ADDRESS	CODEBTO	l٠	DATE CLARATICA DICHERES AND	N	L	s	
INCLUDING ZIP CODE,	I E	١	M DATE CLAIM WAS INCURRED AND	T	0	SPUTE	
AND ACCOUNT NUMBER	Ī	J	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	l N	ũ	Ĭ	AMOUNT OF CLAIM
(See instructions above.)	R	19	is subject to setory, so state.	G E N	ıυ	Ď	
Account No. xxx0958	T	t		T	Ā T E		
	1				D	L	
Cap One		ı					
PO Box 30253		ı					
Salt Lake City, UT 84130		ı					
		ı					
							46.00
Account No. xxx0958	┢	t		H			
Trecount 110. AAAGGG	ł						
Capital One							
PO Box 30253							
Salt Lake City, UT 84130-0253		ı					
Sait Lake City, 01 04130-0233		ı					
							0.00
							0.00
Account No. xxx9538							
	1						
Capital One		ı					
PO Box 30281		ı					
Salt Lake City, UT 84130-0281		ı					
		ı					
							689.00
A (N. 1999)0047	╀	╀					
Account No. xxx8017	l						
Capital One							
PO Box 30281		ı					
		ı					
Salt Lake City, UT 84130-0281		ı					
		ı					
	l						501.00
Account No. xxx3723		T					
	1						
Chase Card							
PO Box 15298	1	l					
Wilmington, DE 19850-5298	1						
3 ,	1	l					
							6,595.00
							0,333.00
Sheet no. <u>1</u> of <u>5</u> sheets attached to Schedule of			5	Subt	ota	1	7 924 00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his 1	pag	ge)	7,831.00

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 18 of 46

B6F (Official Form 6F) (12/07) - Cont.

In re	Robert G Greathouse	Case No	
_	-	Debtor	

				—	—	_	
CREDITOR'S NAME,	CODEBTOR	Ηι	usband, Wife, Joint, or Community	CONT	U N L	D	
MAILING ADDRESS	Ĭ	Н		Ň	Ľ	s	
INCLUDING ZIP CODE,	E	w	DATE CLAIM WAS INCURRED AND	T		P U T E	
AND ACCOUNT NUMBER	ĮŤ	J	CONSIDERATION FOR CLAIM. IF CLAIM	N	Ü	Ĭ	AMOUNT OF CLAIM
(See instructions above.)	O R	С	IS SUBJECT TO SETOFF, SO STATE.	G	חו	חו	
A (N. 2004)	╀	┢		NGENT	Ā	-	
Account No. xxx18	4			'	A T E D		
	ı			\vdash	Ë	┢	1
CLC Servicing Corp	ı						
710 Commerce Dr	ı						
Ste 265	ı						
Woodbury, MN 55125-9204	ı						
	ı						0.00
A (N. 199940	╀	┝		₩	⊢	┡	
Account No. xxx18	ł						
CLC Servicing Corp	ı						
10000 W. Charleston Blvd	ı						
	ı						
Ste 200	ı						
\$0.00	ı						
Las Vegas, NV 89135	ı						0.00
Account No.	t			\vdash	H	H	
	1						
Comcast	ı						
PO Box 3002	ı	l_					
	ı						
Southeastern, PA 19398	ı						
	ı						
	ı						232.00
Account No. xxx0031	t			T	T	T	
	1						
Fifth Third	ı						
38 Fountain Square Plz	ı						
MD 109064	ı						
Cincinnati, OH 45263-0001	ı						
Circiniau, 011 43203-0001	ı						
							628.00
Account No. xx6786	T			П		Г	
	1						
Fifth Third	1	1					
5050 Kingsley Dr	1	1					
I	1	1					
MD 109064	1	1					
Cincinnati, OH 45263	1	1					
							628.00
Sheet no. 2 of 5 sheets attached to Schedule of	•			Subt	tota	 1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				1,488.00
compared to the			(Total of t			, -,	

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 19 of 46

B6F (Official Form 6F) (12/07) - Cont.

In re	Robert G Greathouse	Case No	
_		Debtor	

CREDITOR'S NAME,	C	Ηι	sband, Wife, Joint, or Community	C	U N	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	CODEBTOR	H W J	CONSIDERATION FOR CLAIM. IF CLAIM		UNLLQU	S P U T	AMOUNT OF CLAIM
(See instructions above.)	O R	C	IS SUBJECT TO SETOFF, SO STATE.	NGENT	D A T	ΙF	AMOUNT OF CLAIM
Account No.				Т	T E D		
 Fifth Third Bank					<u> </u>		
PO Box 740778		-					
Cincinnati, OH 45274							
							1,214.00
Account No. xxx0514							
Fingerhut/Webbank							
6250 Ridgewood Rd							
Saint Cloud, MN 56303-0820							
							490.00
Account No. xxxx905							
IMC Credit Services LLC							
C/O Bierman ABA Autism Center							
6955 Hinsdale Ct							
Indianapolis, IN 46250-2054							4,546.00
Account No. xxxx2116							
Lending Club Corporation							
71 Stevenson St							
Ste 300 San Francisco, CA 09410-5295							
							14,145.00
Account No. xxx531							
Marion County Child Support							
129 E Market St							
Indianapolis, IN 46204							
							6,203.00
Sheet no3 of _5 sheets attached to Schedule of		_		Subt			26,598.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his 1	pag	e)	20,030.00

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 20 of 46

B6F (Official Form 6F) (12/07) - Cont.

In re	Robert G Greathouse	Case No	
_	-	Debtor	

CDEDITOD'S NAME	С	Hu	sband, Wife, Joint, or Community	CO	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H & J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N H L N G E N	ONLIQUIDATE	I S P U T E D	AMOUNT OF CLAIM
Account No. xxx5037				T	T E		
Northwest Collectors, Inc C/O Village of Hanover Park Ambula 3601 Algonquin Rd. Ste 500 Rolling Meadows, IL 60008					D		251.00
Account No. xxx1686	t						
Northwest Collectors, Inc C/O Village of Hanover Park Ambula 3601 Algonquin Rd. Ste 500 Rolling Meadows, IL 60008							251.00
Account No.	╁						
Paypal 2221 N First St San Jose, CA 95131		-					2,680.00
Account No. xxx4501	╁			+			,
Peoples Energy 200 E. Randolph Chicago, IL 60601							0.00
Account No. xxx4882	-			+			
Peoples Energy 200 E. Randolph Chicago, IL 60601							0.00
Sheet no4 of _5 sheets attached to Schedule of	-			Subt			3,182.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	5,132.00

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 21 of 46

B6F (Official Form 6F) (12/07) - Cont.

In re	Robert G Greathouse	Case No	
_	-	Debtor	

	1.	1		_		_	Г
CREDITOR'S NAME,	0	Hu	usband, Wife, Joint, or Community	0	N	ا	
MAILING ADDRESS	CODEBTO	Н	DATE CLAIM WAS INCURRED AND	CONTI	Ľ	DISPUTE	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	В	W J	CONSIDERATION FOR CLAIM. IF CLAIM	I N	Q	¥	AMOUNT OF CLAIM
(See instructions above.)	O R	c	IS SUBJECT TO SETOFF, SO STATE.	NGEN	ĭ	Ė	AMOUNT OF CLAIM
	\ <u>`</u>	_		N	D A T E		
Account No. xxx2989	1			ľ	Ė		
l				-	ט		
Wellis Fargo Educ Finance							
PO Box 84712							
Sioux Falls, SD 57117							
							0.00
Account No. xxx3313	1	\vdash		I		H	
Tiecount 10. AAACC1C	ł						
WellIs Fargo Educ Finance							
PO Box 84712							
Sioux Falls, SD 57117							
Gloux Falls, GD 37 FF7							
							0.00
							0.00
Account No. xxxx1829							
	1						
Wells Fargo Education Fina							
501 Bleecker St							
Utica, NY 13501-2401							
							0.00
Account No.	╂						
Account No.	1						
Account No.							
	1						
	1						
	<u></u>						
Sheet no. <u>5</u> of <u>5</u> sheets attached to Schedule of				ubt			0.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	nis	pag	e)	0.00
				т	`ota	1	
			(Report on Summary of Sc				61,947.00
			(Keport on Summary of Sc	1100	uic	0)	

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 22 of 46

B6G (Official Form 6G) (12/07)

In re	Robert G Greathouse	Case No.
_		Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 23 of 46

B6H (Official Form 6H) (12/07)

In re	Robert G Greathouse	Case No.
		Debtor

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Erica Hahn 2960 West 79th street Indianapolis, IN 46268

Kismet Greathouse 1848 Redwood Ave Hanover Park, IL 60133 Non filing spouse Illinois Child Support Enforcement 509 S 6th Street Springfield, IL 62701

Zafer Buyukkusoglu Dolapdere sanayi sitesi 1, ada no 9-11-13 Ikitelli Istanbul Turkiye

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 24 of 46

Fill	in this information to identify your o	case:		I	
	btor 1 Robert G G				
	btor 2 buse, if filing)				
Uni	ited States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS		
	se number nown)		-		d filing ent showing post-petition chapter as of the following date:
0	fficial Form B 6I			MM / DD/ Y	YYY
S	chedule I: Your Inc	ome			12/13
Par	use. If you are separated and you ch a separate sheet to this form. The describe Employment	On the top of any addit			
1.	Fill in your employment information.		Debtor 1	Debtor 2	or non-filing spouse
	If you have more than one job,	Employment status	■ Employed	☐ Emplo	pyed
	attach a separate page with information about additional	Employment status	☐ Not employed	■ Not er	mployed
	employers.	Occupation	Computer Software Engine	eer	
	Include part-time, seasonal, or self-employed work.	Employer's name	Windstream Services LLC		
	Occupation may include student or homemaker, if it applies.	Employer's address	4001 N Rodney Parham Ro Little Rock, AR 72212	I	
		How long employed t	there? 4 Months		
Par	rt 2: Give Details About Mo	nthly Income			
	mate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to report for any	line, write \$0 in the	space. Include your non-filing
	ou or your non-filing spouse have me space, attach a separate sheet to		combine the information for all emp	loyers for that perso	on on the lines below. If you need
				For Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, sala deductions). If not paid monthly.			7,501.00	\$ 0.00

↓.	Calculate gross Income. Add line 2 + line 3.	4.	\$_	7,501.00	\$ S	0.00

0.00

0.00

Estimate and list monthly overtime pay.

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 25 of 46

For Debtor 1	Deb	tor 1	Robert G Greathouse	_	(Case	number (if kno	wn)				
Second						For	Debtor 1					
58. Tax, Medicare, and Social Security deductions 59. \$ 1,568.67 \$ 0.00 \$ 0.00		Сор	y line 4 here	4.		\$	7,501.	.00		illing 5		<u> </u>
58. Tax, Medicare, and Social Security deductions 59. \$ 1,568.67 \$ 0.00 \$ 0.00	5.	List	all payroll deductions:									
55. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. No. Soc. Insurance 5c. No. Soc. Soc. Soc. Soc. Soc. Soc. Soc. So	٠.			53		Φ.	1 569	67	¢		0.00	
5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00												_
5d. Required repayments of retirement fund loans 5e. Insurance 5e. Insurance 5f. Domestic support obligations 5f. S 1,456.00 \$ 0.00 5g. Union dues 5g. Union dues 5f. Domestic support obligations 5f. S 1,456.00 \$ 0.00 5f. Other deductions. Specify: 5f. S 1,456.00 \$ 0.00 5f. Other deductions. Specify: 5f. S 1,456.00 \$ 0.00 5f. Other deductions. Add lines 5a+5b+5c+5d+6e+5f+5g+6h. 6. \$ 3,024.67 \$ 0.00 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+6e+5f+5g+6h. 6. \$ 3,024.67 \$ 0.00 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+6e+5f+5g+6h. 6. \$ 3,024.67 \$ 0.00 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+6e+5f+5g+6h. 6. \$ 3,024.67 \$ 0.00 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+6e+5f+5g+6h. 6. \$ 3,024.67 \$ 0.00 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+6e+5f+5g+6h. 6. \$ 3,024.67 \$ 0.00 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+6e+5f+5g+6h. 6. \$ 3,024.67 \$ 0.00 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+6e+5f+5g+6h. 7. \$ 4,476.33 \$ 0.00 7. \$ 0.00 7. \$ 4,476.33 \$ 0.00 7. \$ 0.00 7. \$ 0.00 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 0.00 8c. Social Security 8c. \$ 0.00 \$ 0.00 8c. Social Security 8c. Other government assistance that you regularly receive linclude cash assistance and the value (if known) of any non-cash assistance hat you receive such as food stamps benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8c. \$ 0.00 \$ 0.00 8c. Social Security 8c. \$ 0.00 \$ 0.00 8c. S												_
5e. Insurance 5f. Domestic support obligations 5f. Si. Other deductions. Specify: 5g. Union dues 5g. Si. 0.000 \$ 0.000 5g. Union dues 5g. Si. 0.000 \$ 0.000 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 3,024.67 \$ 0.000 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 4,476.33 \$ 0.000 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly received: 8c. Si. 0.000 \$ 0.000 8c. Social Security 8c. \$ 0.000 \$ 0.000 8d. \$ 0.000			·						· · —			
5f. Domestic support obligations 5g. Union dues 5g. Union dues 5h. Other deductions. Specify: 5h. Very Specify: 5h. Ver						· —						_
5g, Union dues 5h. Other deductions. Specify: 5h. S 0.00 \$ 0.00 5h. S 0.00 5												_
5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5e+5h. 6. \$ 3,024.67 \$ 0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 4,476.33 \$ 0.00 8. List all other income regularly received: 8. List all other income regularly received: 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses; and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 11. S 4,476.33 + \$ 0.00 12. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 13. Do you expect an increase or decrease within the year after you file this form?									- :			_
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 4,476.33 \$ 0.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. * \$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined mon		-							· · —			
7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and propenty settlement. 8c. \$ 0.00 \$ 0.00 8c. Social Security 8d. \$ 0.00 \$ 0.00 8d. \$ 0.00 \$ 0.00 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 4,476.33	6					· —			· : —			_
8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 0.00 8e. Social Security 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ 0.00 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 10. Calculate monthly income. Add lines 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No.						· —			· —			_
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 0.00 8d. \$ 0.00 \$ 0.00 8e. Social Security 8e. \$ 0.00 \$ 0.00 8e. Social Security 8e. \$ 0.00 \$ 0.00 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 9. Add all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No.				7.		Φ —	4,476.	.33	Φ_		0.00	_
8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and properly settlement. 8c. \$ 0.00 \$ 0.00 8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Add line 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 9. Add all other income. Add line 8 ab+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 45 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form?	8.		Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						•			
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00 8e. Social Security 8e. \$ 0.00 \$ 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form?		01	•									
regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. \$ 0.00 \$ 0.00 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 9. Add all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 14. 4,476.33 Combined monthly income. 15. Do you expect an increase or decrease within the year after you file this form?).	\$_	0.	.00	\$		0.00	<u></u>
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No.		8d. 8e.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security	8d 8d	i.	\$_	0.	.00	\$		0.00	
8h. Other monthly income. Specify: 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00		0.5	that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.								_
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 \$ 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 4,476.33 Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form?		-				· —			· · —			_
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income No.		8h.	Other monthly income. Specify:	8h	1.+	\$_	0.	.00	+ \$		0.00	_
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income No.	9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	5	.	0.	.00	\$		0.0	0
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income No.	10	Cald	culate monthly income Add line 7 ± line 9	10	\$		A A76 33 .	- s		0.00	- \$	4 476 33
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related <i>Data</i> , if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No.			•		Ψ-		7,770.33	. *-		0.00	_	4,47 0.33
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. 4,476.33 Combined monthly income No.	11.	Inclu othe Do r	ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no	ur dep								0.00
monthly income 13. Do you expect an increase or decrease within the year after you file this form? ■ No.	12.	Writ	e that amount on the Summary of Schedules and Statistical Summary of Cert								\$	4,476.33
13. Do you expect an increase or decrease within the year after you file this form? No.										,		
	13.	Do y	•	n?								,

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 26 of 46

Fill	in this informa	tion to identify yo	our case:					
Deb		Robert G Gre				Ch∈	eck if this is: An amended filing	
	tor 2 ouse, if filing)						A supplement sho	wing post-petition chapter the following date:
Unit	ed States Bankro	uptcy Court for the:	NORTH	ERN DISTRICT OF ILLIN	IOIS		MM / DD / YYYY	
1	e number nown)						A separate filing for 2 maintains a separate	or Debtor 2 because Debto arate household
Of	fficial Fo	rm B 6J	_					
So	chedule	J: Your E	Expen	ises				12/1:
info	ormation. If m		eded, atta y question	If two married people a ch another sheet to this n.				
1.	Is this a join							
	■ No. Go to		in a separa	ate household?				
	□ No		st file a sep	parate Schedule J.				
2.	Do you have	e dependents?	□ No					
	Do not list Do and Debtor 2		■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state dependents'				Daughter		_ 1	□ No ■ Yes
					Daughter		6	□ No ■ Yes □ No
								☐ Yes
								□ No
3.		enses include f people other th	han	No			_	☐ Yes
		d your depender		Yes				
Est	imate your ex		our bankrı	uptcy filing date unless				napter 13 case to report of the form and fill in the
the		n assistance and		government assistance luded it on <i>Schedule I:</i>			Your exp	penses
4.		r home ownersl		ses for your residence. r lot.	Include first mortgag	e 4.	\$	1,400.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a.	\$	420.00
		rty, homeowner's	s, or renter	's insurance		4a. 4b.	·	0.00
	•	•		ıpkeep expenses		4c.	·	40.00
_		owner's associati				4d.	·	0.00
5.	Additional n	nortgage payme	ents for yo	our residence, such as ho	ome equity loans	5.	\$	0.00

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 27 of 46

Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: and housekeeping supplies care and children's education costs ing, laundry, and dry cleaning nal care products and services al and dental expenses portation. Include gas, maintenance, bus or train fare. t include car payments. tainment, clubs, recreation, newspapers, magazines, and books table contributions and religious donations ance. t include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. ty: Iment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I). payments you make to support others who do not live with you.	6a. 6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 17a. 17b. 17c. 17d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	280.00 35.00 265.00 0.00 900.00 25.00 80.00 500.00 0.00 0.00 0.00 0.00 0.
Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: and housekeeping supplies care and children's education costs ing, laundry, and dry cleaning anal care products and services cal and dental expenses portation. Include gas, maintenance, bus or train fare. I include car payments. I include car payments. I include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Wehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. I include taxes deducted from your pay or included in lines 4 or 20. I include insurance Other insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. I incent or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Doher. Specify: Dayments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c. 17d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	35.00 265.00 0.00 900.00 25.00 80.00 120.00 500.00 0.00 0.00 40.00 0.00 0.00
Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: and housekeeping supplies care and children's education costs ing, laundry, and dry cleaning nal care products and services all and dental expenses portation. Include gas, maintenance, bus or train fare. t include car payments. tainment, clubs, recreation, newspapers, magazines, and books table contributions and religious donations ance. t include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. ty: Imment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c. 17d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	35.00 265.00 0.00 900.00 25.00 80.00 120.00 500.00 0.00 0.00 40.00 0.00 0.00
Telephone, cell phone, Internet, satellite, and cable services Other. Specify: and housekeeping supplies care and children's education costs ing, laundry, and dry cleaning nal care products and services cal and dental expenses portation. Include gas, maintenance, bus or train fare. t include car payments. tainment, clubs, recreation, newspapers, magazines, and books table contributions and religious donations ance. t include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. ty: Imment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 17a. 17b. 17c. 17d. 17d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	265.00 0.00 900.00 25.00 80.00 120.00 300.00 0.00 0.00 40.00 0.00 0.00 0.
Other. Specify: and housekeeping supplies care and children's education costs ing, laundry, and dry cleaning nal care products and services all and dental expenses portation. Include gas, maintenance, bus or train fare. t include car payments. tainment, clubs, recreation, newspapers, magazines, and books table contributions and religious donations ance. t include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. ty: Imment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c. 17d.	\$	0.00 900.00 25.00 80.00 120.00 500.00 300.00 0.00 0.00 40.00 0.00 0.00 0
and housekeeping supplies care and children's education costs ing, laundry, and dry cleaning nal care products and services al and dental expenses portation. Include gas, maintenance, bus or train fare. t include car payments. tainment, clubs, recreation, newspapers, magazines, and books table contributions and religious donations ance. t include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. ty: Imment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c. 17d.	\$	900.00 25.00 80.00 120.00 500.00 300.00 0.00 0.00 40.00 0.00 0.00 0
care and children's education costs ing, laundry, and dry cleaning nal care products and services cal and dental expenses portation. Include gas, maintenance, bus or train fare. t include car payments. cainment, clubs, recreation, newspapers, magazines, and books cable contributions and religious donations cance. t include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. iy: Imment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 17a. 17b. 17c. 17d. 17d.	* \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	25.00 80.00 120.00 500.00 300.00 0.00 0.00 40.00 0.00 0.00
ing, laundry, and dry cleaning nal care products and services all and dental expenses portation. Include gas, maintenance, bus or train fare. t include car payments. tainment, clubs, recreation, newspapers, magazines, and books table contributions and religious donations ance. t include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. ty: Imment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c. 17d.	\$	80.00 120.00 500.00 300.00 0.00 0.00 40.00 0.00 0.00
nal care products and services al and dental expenses portation. Include gas, maintenance, bus or train fare. t include car payments. tainment, clubs, recreation, newspapers, magazines, and books table contributions and religious donations ance. t include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. ty: Imment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c. 17d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	120.00 500.00 300.00 0.00 0.00 0.00 40.00 0.00 0.00 0.00 0.00
portation. Include gas, maintenance, bus or train fare. t include car payments. tainment, clubs, recreation, newspapers, magazines, and books table contributions and religious donations ance. t include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. ty: Imment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c. 17d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	500.00 300.00 0.00 0.00 0.00 40.00 0.00 0.00 0.00
portation. Include gas, maintenance, bus or train fare. t include car payments. tainment, clubs, recreation, newspapers, magazines, and books table contributions and religious donations ance. t include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. ty: Imment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c. 17d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	300.00 0.00 0.00 0.00 40.00 0.00 0.00
tinclude car payments. tainment, clubs, recreation, newspapers, magazines, and books table contributions and religious donations ance. t include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. ty: Imment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c. 17d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 40.00 0.00 0.00
tainment, clubs, recreation, newspapers, magazines, and books table contributions and religious donations ance. It include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. by: Imment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Depayments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c. 17d.	\$	0.00 0.00 0.00 40.00 0.00 0.00
table contributions and religious donations ance. t include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. The payments for Vehicle 1 Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	15a. 15b. 15c. 15d. 16. 17a. 17b. 17c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 40.00 0.00 0.00
t include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. The payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Depayments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	15a. 15b. 15c. 15d. 16. 17a. 17b. 17c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 40.00 0.00 0.00
t include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. The payments for Vehicle 1 Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Depayments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	15b. 15c. 15d. 16. 17a. 17b. 17c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 40.00 0.00 0.00 0.00
Life insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. Imment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Design and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	15b. 15c. 15d. 16. 17a. 17b. 17c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 40.00 0.00 0.00 0.00
Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. y: Iment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	15c. 15d. 16. 17a. 17b. 17c. 17d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	40.00 0.00 0.00 0.00 0.00
Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. y: Iment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	15d. 16. 17a. 17b. 17c. 17d.	\$	0.00 0.00 0.00 0.00
Do not include taxes deducted from your pay or included in lines 4 or 20. y: Iment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	16. 17a. 17b. 17c. 17d.	\$\$ \$\$ \$ \$	0.00 0.00 0.00
Imment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	17a. 17b. 17c. 17d.	\$ \$ \$ \$	0.00 0.00 0.00
Iment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report ted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	17a. 17b. 17c. 17d.	\$ \$ \$ \$	0.00
Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report ted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	17b. 17c. 17d.	\$	0.00
Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report ted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	17b. 17c. 17d.	\$	0.00
Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report ted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	17c. 17d.	\$	
Other. Specify: payments of alimony, maintenance, and support that you did not report ted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 6I).	17d.	·	0.00
payments of alimony, maintenance, and support that you did not report sted from your pay on line 5, Schedule I, Your Income (Official Form 6I).			
ted from your pay on line 5, Schedule I, Your Income (Official Form 6I).		\$	0.00
		Φ.	0.00
payments you make to support others who do not live with you.	18.	·	
		\$	0.00
ý:	19.	_	
real property expenses not included in lines 4 or 5 of this form or on So			0.00
Mortgages on other property	20a.		0.00
Real estate taxes	20b.	·	0.00
Property, homeowner's, or renter's insurance	20c.	·	0.00
Maintenance, repair, and upkeep expenses	20d.	·	0.00
Homeowner's association or condominium dues	20e.		0.00
: Specify: Bus pass	21.	+\$	60.00
monthly expenses. Add lines 4 through 21.	22.	\$	4.465.00
esult is your monthly expenses.		· ——	1,400100
late your monthly net income.			
	23a.	\$	4,476.33
Copy your monthly expenses from line 22 above.		-\$	4,465.00
• • •			.,
Subtract your monthly expenses from your monthly income.			44.55
The result is your monthly net income.	23c.	\$	11.33
m la C	conthly expenses. Add lines 4 through 21. Sult is your monthly expenses. Ste your monthly net income. Stopy line 12 (your combined monthly income) from Schedule I. Stopy your monthly expenses from line 22 above. Subtract your monthly expenses from your monthly income. The result is your monthly net income. Expect an increase or decrease in your expenses within the year after	conthly expenses. Add lines 4 through 21. 22. Full is your monthly expenses. 23. Ate your monthly net income. 23. Acopy line 12 (your combined monthly income) from Schedule I. 23. Acopy your monthly expenses from line 22 above. 23. Acopy your monthly expenses from your monthly income. 23. Acopy your monthly expenses from your monthly income. 23. Acopy your monthly expenses from your monthly income. 23. Acopy your monthly expenses from your monthly income. 23. Acopy your monthly expenses from your monthly income. 23. Acopy your monthly expenses from your monthly income. 23. Acopy your monthly expenses from your monthly income. 23. Acopy your monthly expenses from your monthly income. 23. Acopy your monthly expenses from your monthly income. 23. Acopy your monthly expenses from your monthly income. 23. Acopy your monthly expenses from your monthly income. 23. Acopy your monthly expenses from your monthly income. 23. Acopy your monthly expenses from your monthly income. 23. Acopy your monthly expenses from your monthly income. 23. Acopy your monthly expenses from your monthly income. 23. Acopy your monthly expenses from your monthly income. 23. Acopy your monthly expenses from your monthly income. 23. Acopy your monthly expenses from your monthly income. 23. Acopy your monthly expenses from your expenses within the year after you file this income. 23. Acopy your monthly expenses from your expenses within the year after you file this income. 24. Acopy your monthly expenses from your expenses within the year after you file this income.	sonthly expenses. Add lines 4 through 21. 22. \$ ult is your monthly expenses. ate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22 above. 23a. \$ 23b\$ Subtract your monthly expenses from your monthly income.

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 28 of 46

B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Northern District of Illinois

In re	Robert G Greathouse			Case No.	
			Debtor(s)	Chapter	7
	DECLARATION CONC				
	I declare under penalty of perjury that I hat of sheets, and that they are true and correct				
Date	November 23, 2015 Signal	ature	/s/ Robert G Greathous Robert G Greathouse Debtor	se	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 29 of 46

B7 (Official Form 7) (04/13)

United States Bankruptcy Court Northern District of Illinois

In re	Robert G Greathouse		Case No.	
		Debtor(s)	Chapter	7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$94,695.00 2014: Joint Wages \$97,716.00 2013: Joint Wages

\$22,499.00 2015 YTD: H Wages new job

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$1,431.00 2013: Pension distribution

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 30 of 46

B7 (Official Form 7) (04/13)

2

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL PAYMENTS AMOUNT PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ VALUE OF AMOUNT STILL NAME AND ADDRESS OF CREDITOR TRANSFERS TRANSFERS OWING

...

П

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

Zafer Buyukkusoglu

Brother in law

DATE OF PAYMENT \$1,400/month. Brother in law financed debtor's home purchase. AMOUNT PAID **\$0.00**

AMOUNT STILL OWING \$135.000.00

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT NATURE OF COURT OR AGENCY STATUS OR AND CASE NUMBER PROCEEDING AND LOCATION DISPOSITION

None h Dogo

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 31 of 46

B7 (Official Form 7) (04/13)

3

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Cutler & Associates, Ltd 4131 Main Street Skokie, IL 60076 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR Sept 2015 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$1,200.00

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 32 of 46

B7 (Official Form 7) (04/13)

4

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION Fifth Third Bank

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE Checking closed August 2015 \$-0- at time of closing

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

LOCATION OF PROPERTY

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 33 of 46

B7 (Official Form 7) (04/13)

5

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

GOVERNIMENTAL CIVIT

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 34 of 46

B7 (Official Form 7) (04/13)

6

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS ENDING DATES

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 35 of 46

B7 (Official Form 7) (04/13)

7

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21 . Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

None

ADDRESS

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 36 of 46

B7 (Official Form 7) (04/13)

8

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date November 23, 2015
Signature /s/ Robert G Greathouse
Robert G Greathouse
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 37 of 46

B8 (Form 8) (12/08)

United States Bankruptcy Court Northern District of Illinois

In re Robert G Greathouse		Debtor(s)	Case No. Chapter	7
СНАРТ	ER 7 INDIVIDUAL DEBT			
PART A - Debts secured by property of the estate.	roperty of the estate. (Part A Attach additional pages if no		completed for EACl	H debt which is secured by
Property No. 1				
Creditor's Name: Zafer Buyukkusoglu		Single Family		: ledwood Ave, Hannover 177,000 less cost of sale)
Property will be (check one):				
☐ Surrendered	■ Retained			
If retaining the property, I intend ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain		oid lien using 11	1 U.S.C. § 522(f)).	
Property is (check one):				
■ Claimed as Exempt		☐ Not claime	d as exempt	
PART B - Personal property subj Attach additional pages if necessa		e columns of Pa	rt B must be complete	ed for each unexpired lease.
Property No. 1				
Lessor's Name: -NONE-	Describe Leased Pr	roperty:	Lease will be U.S.C. § 365 ☐ YES	e Assumed pursuant to 11 (p)(2): ☐ NO
I declare under penalty of perjupersonal property subject to an Date November 23, 2015		/s/ Robert G G	reathouse	estate securing a debt and/or
		Robert G Grea	thouse	
		Debtor		

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 38 of 46

United States Bankruptcy Court Northern District of Illinois

In r	e Robert G Greathouse		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	NSATION OF ATTOR	RNEY FOR DE	CBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 20 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of the debtor (s) in co	g of the petition in bankruptcy,	or agreed to be paid	to me, for services	at rendered or to
	For legal services, I have agreed to accept		\$	1,200.00	
	Prior to the filing of this statement I have received.		\$	1,200.00	
	Balance Due			0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are mem	pers and associates	of my law firm.
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the narrows.				law firm. A
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspects	s of the bankruptcy c	ase, including:	
	 a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, stated. c. Representation of the debtor at the meeting of credited. d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of the secured creditors on home. 	ement of affairs and plan which ors and confirmation hearing, an reduce to market value; exe ons as needed; preparation	may be required; d any adjourned hea	rings thereof;	I filing of
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis- any other adversary proceeding.			es, relief from st	ay actions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	y agreement or arrangement for	payment to me for re	presentation of the	debtor(s) in
Date	ed: November 23, 2015	/s/ David Cutler			
		David Cutler	مم ا دم		
		Cutler & Associat 4131 Main St	es, Lta.		
		Skokie, IL 60076			
		847-673-8600 Fa			
		stuartIswanson@	gmail.com		

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 40 of 46

Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Case 15-39813 Doc 1 Filed 11/23/15 Entered 11/23/15 11:04:18 Desc Main Document Page 41 of 46

B 201B (Form 201B) (12/09)

United States Bankruptcy Court Northern District of Illinois

		1 (of the H District of Immors		
In re	Robert G Greathouse		Case No.	
		Debtor(s)	Chapter	7
		NOF NOTICE TO CONSUM 42(b) OF THE BANKRUPTO		(S)
Code.	I (We), the debtor(s), affirm that I (we) has	Certification of Debtor ave received and read the attached not	tice, as required by	y § 342(b) of the Bankruptcy
Rober	rt G Greathouse	X /s/ Robert G Gr	eathouse	November 23, 2015
Printe	d Name(s) of Debtor(s)	Signature of De	btor	Date
Case N	No. (if known)	X		
		Signature of Joi	nt Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court Northern District of Illinois

		1 tot the m District of Immors		
In re	Robert G Greathouse		Case No.	
		Debtor(s)	Chapter 7	
	VF	ERIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	32
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of credit	ors is true and correct	t to the best of my
Date:	November 23, 2015	/s/ Robert G Greathouse Robert G Greathouse		

ACS Education Services 501 Bleecker St Utica, NY 13501

ACS/College 501 Bleecker St Utica, NY 13501-2401

American Eagle Bank 556 Randall Rd South Elgin, IL 60177

Best Buy/CBNA PO Box 6497 Sioux Falls, SD 57117-6497

Cap One PO Box 30253 Salt Lake City, UT 84130

Capital One PO Box 30253 Salt Lake City, UT 84130-0253

Capital One PO Box 30281 Salt Lake City, UT 84130-0281

Capital One PO Box 30281 Salt Lake City, UT 84130-0281

Chase Card PO Box 15298 Wilmington, DE 19850-5298

CLC Servicing Corp 710 Commerce Dr Ste 265 Woodbury, MN 55125-9204 CLC Servicing Corp 10000 W. Charleston Blvd Ste 200 \$0.00 Las Vegas, NV 89135

Comcast PO Box 3002 Southeastern, PA 19398

Credit Management 4200 International Pwy Carrollton, TX 75007

Erica Hahn 2960 West 79th street Indianapolis, IN 46268

Fifth Third 38 Fountain Square Plz MD 109064 Cincinnati, OH 45263-0001

Fifth Third 5050 Kingsley Dr MD 109064 Cincinnati, OH 45263

Fifth Third Bank PO Box 740778 Cincinnati, OH 45274

Fingerhut/Webbank 6250 Ridgewood Rd Saint Cloud, MN 56303-0820

Illinois Child Support Enforcement 509 S 6th Street Springfield, IL 62701

IMC Credit Services LLC C/O Bierman ABA Autism Center 6955 Hinsdale Ct Indianapolis, IN 46250-2054

Kismet Greathouse 1848 Redwood Ave Hanover Park, IL 60133

Lending Club Corporation 71 Stevenson St Ste 300 San Francisco, CA 09410-5295

Marion County Child Support 129 E Market St Indianapolis, IN 46204

Northwest Collectors, Inc C/O Village of Hanover Park Ambula 3601 Algonquin Rd. Ste 500 Rolling Meadows, IL 60008

Northwest Collectors, Inc C/O Village of Hanover Park Ambula 3601 Algonquin Rd. Ste 500 Rolling Meadows, IL 60008

Paypal 2221 N First St San Jose, CA 95131

Peoples Energy 200 E. Randolph Chicago, IL 60601

Peoples Energy 200 E. Randolph Chicago, IL 60601

Wellls Fargo Educ Finance PO Box 84712 Sioux Falls, SD 57117

Wellls Fargo Educ Finance PO Box 84712 Sioux Falls, SD 57117 Wells Fargo Education Fina 501 Bleecker St Utica, NY 13501-2401

Zafer Buyukkusoglu Dolapdere sanayi sitesi 1, ada no 9-11-13 Ikitelli Istanbul Turkiye